

FIRE PROTECTION SYSTEMS PERMIT APPLICATION CITY OF ALEXANDRIA, VIRGINIA DEPARTMENT OF CODE ADMINISTRATION

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PERMIT NUMBER	FPS_	
MASTER PERMIT	BLD_	
Permit Fee:	\$_	
Date Issued:	_	

GENERAL INFORMATION	PROJECT INFORMATION	SYSTEM INFORMATION
DATE ADDITED	TYPE OF WORK: COMMERCIAL RESIDENTIAL	AUTOMATIC SPRINKLER SYSTEM
DATE APPLIED	☐ NEW CONSTRUCTION ☐ ALTERATION ☐ REPAIR ☐ REPLACEMENT ☐ UPGRADE	TOTAL NUMBER OF SPRINKLERS
PROJECT NAME	LI REFERENTI LI OFGRADE	AUTOMATIC SUPPRESSION SYSTEM
PROJECT ADDRESS	DROIECT DESCRIPTION:	TOTAL NUMBER OF AGENT NOZZLES
	PROJECT DESCRIPTION:	FIRE ALARM SYSTEM
FLOOR / SUITE		TOTAL NUMBER OF INITIATING DEVICES TOTAL NUMBER OF SIGNALING DEVICES
OWNER		TOTAL NUMBER OF ANNUNCIATOR PANELS
		TOTAL NUMBER OF CONTROL PANELS
NAME		TOTAL NUMBER OF DIALERS
ADDRESS		ACCESS-CONTROL SYSTEM
		TOTAL NUMBER OF MAGNETIC LOCKS
PHONE FAX		TOTAL NUMBER OF MORTISE LOCKS
E-MAIL_		TOTAL NUMBER OF STRIKE LOCKS TOTAL NUMBER OF EXIT PUSH BUTTONS
APPLICANT / CONTRACTOR	CONSTRUCTION CODE(S) / YEAR	TOTAL NUMBER OF EXIT SENSORS
Work will be performed by: OWNER CONTRACTOR		TOTAL NUMBER OF LOCK RELEASE SWITCH
Work will be performed by.	CONSTRUCTION TYPE(S): 🗆 I 🗆 II 🗆 IV 🗆 V	TOTAL NUMBER OF STAIRWAY PHONES
NAME		FIRE HYDRANTS
ADDRESS	OCCUPANCY(S): A B E F DH DI DM R	TOTAL NUMBER OF FIRE HYDRANTS
		☐ INSTALL A NEW FIRE HYDRANT & VALVE ☐ RELOCATE AN EXISTING FIRE HYDRANT & VALVE
PHONEFAX	NUMBER OF STORIES: ABOVE GRADE BELOW GRADE	☐ REPAIR / REPLACE AN EXISTING FIRE HYDRANT
E-MAIL		UNDERGROUND FIRE SERVICE MAINS
VA LICENSE #	NUMBER OF OCCUPANTS (GROUP A FIRE ALARM ONLY):	TOTAL NUMBER OF FIRE SERVICE LINES □ FROM THE PUBLIC WATER SUPPLY TO INSIDE THE BLDG.
BUSINESS LICENSE #		☐ FROM STREET VALVE TO 5FT. OUTSIDE THE BUILDING
CLASS 🛮 A 🔻 B 🗘 C RECIPROCITY? 🗘 YES 🗘 NO	ESIMATED JOB COST - CONTRACT AMOUNT (including all mark-up,	☐ FROM 5FT. OUTSIDE THE BUILDING TO INSIDE THE BLDG.
MECHANIC'S LIEN AGENT? ☐ Non Designated ☐ Yes, specify Agent:	overhead, labor, profit, etc.)	☐ FREE-STANDING FIRE DEPARTMENT CONNECTION
MEGNATIO 3 LEIVAGENT: LINON Designated Li 163, specify Agent.		
	\$	
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